lieve the condition, but the patient may not have the money for any surgical assistance whatever. or may get incompetent service, losing his sight in either case. Certainly those who suffer from cataract before they reach the marriageable age should not reproduce. For those who are members of a cataractous family in which the opacity develops late in life, it becomes, I suppose, a matter of individual conscience, since they cannot tell until too late to rear a family whether or not they are to be victims of cataract. They should know two things, however, the first being that the cataract tends to develop at an earlier age in the children than it did in the parents, and that cataract, despite its operability furnishes as many as 13 per cent of the pupils in the institutions for the blind.

Ten years ago, Loeb, writing the history of a family with cataract was impressed with the necessity of eliminating blindness due to hereditary causes. This last winter I noted a report from a little mining village in West Virginia, where the good hearted miners contributed of their savings to send the two daughters, aged 22 and 24, of a fellow miner to Baltimore to have removed from both eyes cataracts which had caused total blindness since their birth.

How long are we going to leave in ignorance those who may be the progenitors of defective children? How long are we to allow those who hold such tragic potentialities within them, either unwittingly or with full knowledge, to pile still higher the ever increasing numbers of those who are denied, because of their inheritance, the chance to be normal beings?

Commercial Bacillus Acidophilus and Bacillus Bulgaricus Cultures and Preparations. -In summarizing the results of his survey, Lawrence H. James, New Haven, Conn., directs attention to several pertinent facts: (1) The milk

cultures showed the highest average counts, the whey cultures next to the highest, and the solid cultures the lowest (omitting the inaccurate results of the semisolid cultures). (2) All samples of one type from any one producer, examined before the expiration date, were more or less similar in quality, regardless of their age. (3) Liquid and solid preparations marketed by the same producer were somewhat similar in quality. (4) Contaminating organisms were more common in solid than in broth or milk cultures. (5) Of thirty-three strains of organisms isolated from

cultures claimed to be B. acidophilus, nineteen

BIBLIOGRAPHY

- 1. ADAMS, P. H., Trans. Oph. Soc. U. K., 1909, p. 274.
- Ibid., p. 275.
 Am. Encyclopædia of Ophthalm., Cleveland Press, Chicago, 1914, iv: article on Coloboma.
- 4. BLAIR, C., AND POTTER, B., Trans. Oph. Soc. U. K., 1903, p. 261.
- 5. Brown, A. J., Am. J. Ophth., 1924, vii, 36.
 6. Calhoun, F. P., Ibid., 1919, ii, 255.
- 7. CHANCE, B., Ophth. Rec., 1907, p. 297. Change, B., Ophth. W., Isola, 15th. J. G., 1925.
 Clausen, W., Zentralbl. f. d. ges. Ophth. u. ihre Grenzgeb., 1925, xiii, 1-55.
 Cunningham, J. F., Trans. Ophth. Soc. U. K., 1909,
- 10. DAVENPORT, C., Heredity and Eugenics, Un. of Chicago Press, 1912.
- 11. DEBECK, D., Trans. Am. Ophth. Soc., 1894, p. 117.

- DERBY, H., *Ibid.*, 1888-90, 722.
 DICKEY, J. L., *J. Am. M. Ass.*, 1916, lxvi, 2113.
 DORRELL, E. A., *Trans. Oph. Soc. U. K.*, 1911, p. 157.
- FISHER, H., *Ibid.*, 1905, p. 90.
 GOSSAGE, A. M., *Quart. J. Med.*, 1908-09, i, 331.
- 17. GREEN, J., Trans. Am. Oph. Soc., 1888-90, p. 724. 18. HARMAN, N. B., Trans. Oph. Soc. U. K., 1909, p.
- 19. HESSIN, Klin. Monatsbl. f. Augenheilk., 1914, liii.
- 20. HOSFORD, S., Trans. Oph. Soc. U. K., 1911, 50.
- 21. LASEREW AND PETROW, Klin. Monatsbl. f. Augenheilk., 1914, liii, 329.

- 22. Lewis, A. C., Oph. Rec., 1915, xxiv, 134. 23. Loeb, C., Ann. of Oph., 1917, xxvi, 573. 24. Macklin, M. T., Canad. M. Ass. J., 1927, xvii, 421.
- 25. Marcinkus, J., Medicina, 1924, i, 12. 26. Mittendorf, W. F., Trans. Am. Oph. Soc., 1880-84, p. 735.
- NETTLESHIP, E., AND OGILVIE, F. M., Trans. Oph. Soc. U. K., 1906, xxvi, 191.
 NETTLESHIP, E., Ibid., 1908, xxviii, 220.

- 29. *Ibid.*, p. 226. 30. *Ibid.*, 1909, xxix, 188.
- 31. *Ibid.*, p. 201.
- 32. Ibid., p. 62.
- 33. Ibid., (cited by Howe, L., Eugenics Rec. Off. Bull., 1921, vol. xxi).
 34. Page, H., Lancet, 1874, ii, 193.

- PAGE, H., Lancet, 1814, II, 193.
 PARKER, E. F., J. Am. M. Ass., 1898, xxxi, 708.
 RISLEY, S. D., Ibid., 1915, lxiv, 1310.
 SNELL, S., Trans. Oph. Soc. U. K., 1908, xxviii, 148.
 THEOBALD, S., Trans. Am. Oph. Soc., 1888-90, p. 99.
 WILDER, W., J. Am. M. Ass., 1898, xxxi, 710.
 TRANS. Am. Oph. L. A. Trans. Am. Oph.
- 40. ZIEGLER, S. L., AND GRISCOM, J. M., Trans. Am. Oph. Soc., 1915-16, p. 356.

showed a possibility of being that organism and fourteen did not; and of fifteen organisms isolated from preparations claimed to be those of B. bulgaricus, ten showed a possibility of being that organism and five did not. Therapeutic claims were disregarded in this survey. Of 107 samples examined, thirteen produced the species claimed on the label in reasonably pure form and in satisfactory number. Of the remaining samples, fifteen were sufficiently pure and presented viable organisms in sufficient number to have possible value. The others were worthless as representing cultures of the species claimed. James feels that there is need of revision of the present methods of marketing acidophilus and bulgaricus cultures and preparations.—Jour. Am. Med. Ass., July 9, 1927.